

State of New Hampshire 2004 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2004

ANNUAL REPORTS RECEIVED AFTER APRIL 15, 2004, WILL BE ASSESSED A \$50.00 LATE FEE.

ADDRESS OF PRINCIPAL OFFICE:

MERCY ANIMAL HOSPITAL, LLC 81 DANIAL WEBSTER HWY MERRIMACK, NH 03054

MERRIMACK, NH 03054 ENTITY TYPE: LLC				81 DANIAL WEBSTER HWY MERRIMACK, NH 03054
		.		REGISTERED AGENT AND OFFICE:
				CEEDILEN A COLL DECO
	STATE OF DOMICILE: NH		8	STEPHEN A GOULD ESQ
	FEDERAL ID: 020511704		2	20 MARKET ST PO BOX 808
	ANY LAWFUL ACT INCL PROVIDE VETERINARY MEDICAL & OTHER ANIMAL RELATED SVCS		N	MANCHESTER, NH 03105
2	If changing the mailing or principal office address, please check to The new mailing address The new principal office address	he ap	prop	riate box and fill in the necessary information.
	PO Box is accep	table	÷.	
3	LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT A NAME NA STREET STE CITY/STATE/ZIP CIT NAME NA STREET CIT NAME NA STREET STE CITY/STATE/ZIP STE CITY/STATE/ZIP CIT NAME NA STREET STE STREET STE	MUS ME REET Y/ST ME REET Y/ST ME REET Y/ST ME REET Y/ST ME	T LIST TATE TATE TATE TATE	Z/ZIP Z/ZIP
4	To be signed by the Manager, if no manager, I, the undersigned do hereby Certify that the statements on this report Sign here: Please print name and title of signer: NAME	must	t be si	igned by a member.
	REPORT FEE IS: \$100.00 E-MAIL ADDRESS (OPT	ION	(AL):	

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE RETURN COMPLETED REPORT AND PAYMENT TO: